



UNIVERSAL NURSING COLLEGE

Haji Shahabuddin Mansion, 52 (New Ka-15/6) Shohid Tajuddin Ahmed Shoroni

Mohakhali, Dhaka-1215, Bangladesh.

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Photo

Application Form for MSc in Nursing

- ☐ Adult & Elderly Health Nursing ☐ Women's Health & Midwifery Nursing ☐ Child Health Nursing
☐ Mental Health & Psychiatric Nursing ☐ Community Health Nursing ☐ Nursing Management

298

SI No :

Session :

Roll No :

Reg. No :

Batch :

Name of the Candidate :
(in Capital Letter as Per SSC certificate)

Father's Name : Profession :

Mother's Name : Profession :

Present Address :

Permanent Address :

Name of the Local Guardian with Address :

Relation with the Local Guardian :

Date of Birth : Sex : Blood group : Religion :

Nationality : Marital Status : Parents income (Monthly) :

NID/Birth Cer. : Mobile no. (student) : E-mail :

Parent's Mobile no. : Local Guardian Mobile no. :

Admission Test Score : Date of Admission :

Academic Details of the Student

Name of Exam.	Year	Board	Institute	GPA

* use separate sheet if needed

Declaration

1. The above information given by me are correct and true
2. If I selected for enrollment of the above course, I will abide by all rules and regulation of the college. otherwise college authority can take any decision against me.

Signature of Father / Mother / Local Guardian (✓ one)

Signature of the Candidate

Following documents must be submitted with this application form

(failing which the applicant will not be considered for admission test)

1. Academic Transcript of SSC, HSC Relevant Examination
2. Photocopy of original/professional certificate of SSC, HSC Relevant Examination (Attested by Class-I Govt. Officer)
3. Admission process fee receipt. (Money Receipt)
4. National ID Card / Birth Certificate (Photocopy)
5. Admit Card of Admission Test
6. Document of Admission Test Score
7. Diploma in Nursing/Diploma in Midwifery/B.sc in Nursing/Post Basic B.sc in Nursing/Post Basic B.sc in Public Health Nursing from recognized by institute the Bangladesh Nursing and Midwifery Council (BNMC) Certificate
8. RN Certificate from BNMC (Update)
9. At least two years of clinical experience certificate

Approval for Admission

Roll No :

Reg. No :

Session :

Name of the Candidate :

Father's Name :

Mother's Name :

Discipline :

Date :

Principal